FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-02							
Estimated average burden							
hours per response:	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* HENRIKSEN RONALD D				2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>CYTORI THERAPEUTICS, INC.</u> [ CYTX ]						] (Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
HENRIKSEN KONALD D												Compare de la	r		10% Ow	ner
(Last)	`	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/26/2007							Officer (give title below) Other (specify below)				
C/O CYTORI THERAPEUTICS, INC.																
3020 CALLAN ROAD				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN DII	EGO X	1	92121							- 1	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
Date			2. Transac Date (Month/Da	Execution Date,		Code (Instr. 5)		ed (A) or tr. 3, 4 and	5. Amour Securitie Beneficia Owned F Reported	es Form ally (D) o Following (I) (II		: Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership			
						Code V	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			(Instr. 4)		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
L. Title of Derivative Security Instr. 3)  2. Conversion or Exercise Price of Derivative Security  Security  Security  3. Transaction Date (Month/Day/Year)  34. Deemed Execution Date, if any (Month/Day/Year)		4. Tra	5. Number 6. ansaction of E code (Instr. Derivative (M		6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and A of Securities Underlying Derivative Se (Instr. 3 and 4		d Amount ties g Security	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficial Owned Following Reported	Following Reported Transaction(s)		11. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Cod	de V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Non- Qualified Stock Option (Right to Buy)	\$5.44	02/26/2007		A		20,000		03/26/2007 <sup>(1)</sup>	02/26/2017	Common Stock	20,000	\$0	225,00	00	D	

## **Explanation of Responses:**

1. The options vest 1/24th each month from the date of grant.

## Remarks:

Jonathan E. Soneff, By Power of Attorney For: Ronald D.

02/28/2007

<u>Henriksen</u>

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.